

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10712525

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
101	1					
2		1				
3	1	.				
4		1				
5						
6						
7		1				
8	1					
9						
10						
11						
12						
13						
14						
15						
16						
17						
18	1					
19						
20						
21						
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42						
43						
44						
45						
46						
47						
48						
49						
50						
TOTAL IND.	15					
TOTAL DEP.	128					
TOTAL CLAIMS	143					

IND	DEP	IND	DEP	IND	DEP
51					
52					
53					
54					
55					
56					
57					
58					
59					
60					
61					
62					
63					
64					
65					
66					
67					
68					
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84					
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86					
87					
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92					
93					
94					
95					
96					
97					
98					
99					
100					
TOTAL IND.					
TOTAL DEP.					
TOTAL CLAIMS					

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FEE CALCULATION SHEET

SERIAL NO.

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1	1					
2						
3						
4						
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37						
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39						
40						
41						
42						
43						
44	1					
45						
46						
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48						
49						
50						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

	IND	DEP	IND	DEP	IND	DEP
51						
52						
53						
54	1					
55	1					
56						
57						
58						
59						
60						
61						
62						
63						
64						
65	1					
66	3					
67	3					
68	3					
69	3					
70	3					
71	3					
72	3					
73	3					
74	3					
75	1					
76	1					
77	1					
78	1					
79	1					
80	1					
81	1					
82	1					
83	1					
84	1					
85						
86						
87						
88						
89	1					
90						
91						
92	1					
93	1					
94						
95						
96						
97						
98						
99						
100						
TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						